	Express Mail Label No. (if applicable)						
	Application No.	10/583,804					
on	Confirmation No.	4887					
	Filing Date	January 23, 2007					
	First Named Inventor	TAO et al.					
	Group Art Unit	1626					
	Examiner Name	Shterengarts, Samanatha L.					

252846

## Request for Continued Examination (RCE) Transmittal Address to:

Mail Stop RCE Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Attorney Docket No.

Client Reference No.

1 Curk principal are provinced consider 27 CED 4.444												
1.												
		Ш i.		riously submitted Consider the amendment/s/reply under 37 CER 1 116 proviously filed on								
		١.			nsider the amendment(s)/reply under 37 CFR 1.116 previously filed on yunentered amendment(s) referred to above will be entered.)							
		ii.		Consider the arguments in the Appeal Brief or Reply Brief previously filed on								
		iii.	_	Other:								
	b.	$\boxtimes$	Enclosed									
		i.		Amendm	ent/Rep	oly		iv.	□ Form PTC	D-1449		
		ii.				aration(s)			Opies of	Referen	ces listed in For	
		iii.	(except for U.S. patents and applications)  ✓ Information Disclosure Statement (IDS)  ✓ Vi. ☐ Other:									
2.	Miscellaneous											
	a.  Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for							c) for a period				
		of months. (Period of suspension shall not exceed 3 months; fee under 37 CFR 1.17(i) required.)										
	b.	. 🗖										
	C.		Other	r:								
3.	B. Fees - The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.											
		✓ Please charge Deposit Account No. 12-1216 in the total amount indicated below.										
									\$810.00			
		ii.								\$1,110.00		
		iii.	□ A	n exten	·							
			\$ 0.00 is deducted from the total fee due for the total amount of extension now									
				equeste								
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	well as for any additional period necessary to render the present submission timely.											
					-	-			the appropriat	e petition	ı fee.	
								\$ 0.00				
vi. 🗌 Other:												
		νii.	<u>□</u> c	Claim fee	}							
				LAIMS		HIGHEST	_					
				MAINING NFTER		Number Previously	Extra Claims		ADD'L		Add'l Claim	
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	h	$\square$	The C	Commiss	sioner is	hereby auth						ψ1320.00
b. The Commissioner is hereby authorized to charge any deficiencies in the above fees or to credit any overpayments to Deposit Account No. 12-1216.												

## REQUEST FOR CONTINUED EXAMINATION TRANSMITTAL (continued)

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED								
Name (Print/Type)	Christopher T. Griffith	Registration No. (Attorney/Agent)	33,392					
Signature	/Christopher T. Griffith/	Date	August 7, 2009					
Address	Leydig, Voit & Mayer, Ltd. Two Prudential Plaza, Suite 4900 180 North Stetson Avenue Chicago, Illinois 60601-6731	Phone	(312) 616-5600 (telephone) (312) 616-5700 (facsimile)					